

DHCS

**TRAIN THE  
TRAINERS  
2010/2011**

California Department of  
**HealthCareServices**



## TRAINING AGENDA

- **Time Survey Overview**
- **School-Based MAA Provider Manual Updates**
- **Activity Codes and Samples**
- **Site Visit Findings**
- **Q & A**

## **PURPOSE OF THIS TRAINING**

- Provide an overview of the time survey process to ensure program compliance
- Ensure each participant identifies the actual time performing the MAA activities reported on the time survey
- Provide information to help identify activities that are eligible for federal reimbursement under the MAA program
- Provide Examples of Activity Code Samples



# **School-Based MAA Time Survey Overview**

# PURPOSE OF TIME SURVEY

The time survey is the foundation of MAA claiming:

- The time survey is the basis for claiming federal funds
- The time survey is designed to capture what activities LEAs do on a regular basis

## **WHICH LEA STAFF SHOULD TIME SURVEY**

Consider two factors:

- Do they perform MAA?
- Are appropriate non-federal funds expended to receive federal reimbursement?

# **TIME SURVEY PARTICIPATION**

- How do LEAs participate in MAA?
- When must staff be trained?

## WHEN TO TIME SURVEY

- DHCS randomly selects a time survey week period for each quarter
- The LECs/LGAs are notified of the time survey dates, via PPL, no later than the first day in May of the first-quarter time survey period and forty-five days prior to the beginning of the second, third, and fourth quarter

Continued on next slide ....



## WHEN TO TIME SURVEY

**During Time Survey period when students are:**

- In session: Time survey for 5 consecutive days, excluding Saturdays, Sundays and holidays.
- Out of session: for 5 consecutive days and fewer than 30 calendar days, time survey on the first day school resumes and students are in session.
- Out of session: for 5 consecutive days and continue out of session for 30 or more days, time survey on the sixth day school resumes and students are in session.

...continued

# TIME SURVEY REVIEW PROCESS

- 1<sup>st</sup> review must be conducted by the time survey participant supervisor
- 2<sup>nd</sup> review is done by the LEA MAA Coordinator.
- 3<sup>rd</sup> review must be performed by the LEC/LGA and may not be contracted out.
- It is the responsibility of the LEC/LGA coordinators who sign the invoices and claiming unit functions grid to assure the accuracy of the time surveys.
- On each time survey form the sample descriptions of MAA activities must maintain a minimum of 80% accuracy for inclusion into the invoice.

# RED FLAGS TO LOOK FOR

## Supervisors review

- Clean, legible recording of hours or portions of hours for the entire paid workday. Additional and stricken out information is initialed by participant
- Correct totaling of MAA and non-MAA hours
- Correct sample descriptions for MAA activities that contain the four W's (who, what, where, & why)
- Time survey sample must be provided for time charged to claimable MAA code
- Ensure time survey forms are signed in blue ink and dated by participant and supervisor

## RED FLAGS TO LOOK FOR (LEC/LGA level)...

- Individuals classified under the same duty statement charging significantly different time survey codes.
- Paid time off not identified
- Percentages that do not match throughout the invoice
- Incorrect contract number for claiming fiscal year
- Acronyms are not spelled out on time surveys



# **School-Based Medi-Cal Administrative Activities (SMAA) Manual Updates**

# School-Based MAA

## UPDATES

There are a few changes:

- Electronically filled Time Survey Form samples now wrap within each sample space.
- Added the Certified Public Expenditure (CPE) certification to both the LEC & LGA Summary Invoice and Tab 4.
- If a time error occurs, an increase/decrease to Code 1 percentage only may be made in order to total 100%.

# School-Based MAA

??? Questions ???

Comments...





# **MAA Codes & Samples**



# CODE 1

## School- Related, Educational, and Other Activities (U)

**Are activities that do not relate to Medi-Cal, are not administrative in nature or do not meet the definition of the any other code category.**

Samples of non-reimbursable activities for Code 1:

“Participating in a parent/teacher conference to discuss the academic challenges that a student was having.”

”Generating modified lesson plans for an autistic child and evaluating curriculum.”

Continued on next slide ....



## Immunizations

Activities related to immunization requirements for **school attendance** are considered “Free Care” and cannot be billed to Medi-Cal. This service should be claimed to code 1.

...continued



# CODE 2

## Direct Medical Services (U)

**Activities that are an integral part of or an extension of a medical service (e.g. student follow-up, student assessment, student counseling, student education, consultation, and student billing activities, including arranging and coordinating IEP meetings).**

Here are samples of non-reimbursable activities for Code 2:

“Administered an insulin injection for a diabetic student with high blood sugar levels in the school clinic.”

“Spent time reviewing student’s health history records”.

# CODE 3

## Non-Medi-Cal Outreach (U)

Here are samples of non-reimbursable activities that should be coded to code 3:

“Providing information about drug awareness to students at the health fair.”

“Spoke with a student regarding different college options that fit their career interests.”

# CODE 4

## Initial Medi-Cal Outreach

(TM/50-Percent FFP)

This code should be used when performing:

- Initial activities that inform eligible or potentially eligible individuals about Medi-Cal programs, services and how to access them.
- Initial activities include bringing potential eligible's into the Medi-Cal system for the purpose of determining eligibility and initially arranging for the provision of Medi-Cal covered services.



## Code 4 samples allowable by DHCS :

The following demonstrate good samples of code 4 from actual time surveys:

“Distributed Medi-Cal/Healthy Families flyers to families with in my class”

“Told parents of 1<sup>st</sup> grade student about the Medi-Cal program and services”



# CODE 4

## Corrections

### Not allowed

“Attended IEP meetings.”

### Allowed

“I made an initial referral to a mental health counselor during an IEP meeting.”

---

### Not allowed

“Distributed flyers for sports physicals to athletes to the Health Clinic.”

### Allowed

“Distributed flyers to students that had a list of local health clinics that accept Medi-Cal.”



# CODE 5

## Facilitating Application for Non-Medi-Cal Programs (U)

Code 5 should be used by school staff when informing an individual or family about social or educational programs, and referring them to the appropriate agencies.

Here are samples of code 5 non-reimbursable activities:

“Discussed with teen parent the procedures for getting and completing an application for Women, Infants, and Children (WIC.)”

“Verified a student’s continued eligibility for the National School Lunch Program.”





# CODE 6

## Facilitating Medi-Cal Application (TM/50-Percent FFP)

Code 6 should be used when assisting individuals in becoming eligible for Medi-Cal/Healthy Families.

*Please note: This activity does not include the actual determination of Medi-Cal eligibility.*



## Code 6 samples allowable by DHCS :

These demonstrate good samples for code 6 from actual time surveys:

“I assisted parents in gathering paperwork to submit an application to Medi-Cal/Healthy Families for their children.”

“Reviewed National School Lunch information to facilitate Medi-Cal/Healthy Families enrollment.”



# Code 6

## Corrections

### Not allowed

“Discussed with parent the procedures for getting and filling out an application.”

### Allowed

“Discussed with parent Medi-Cal/Healthy Families eligibility and assisted with the completion of the Medi-Cal application.”

### Not allowed

“While assisting family with Healthy Families/Medi-Cal application, the parent indicated they did not want to apply for Medi-Cal.”

### Allowed

“Processed Medi-Cal/Healthy Families applications for student.”

### Not allowed

“Helped family gather documents to apply”

### Allowed

“Helped family gather documents for Medi-Cal/Healthy Families application.”



# CODE 7

## Referral, Coordination and Monitoring of Non-Medi-Cal Services (U)

Staff should use Code 7 when making referrals for coordinating, and/or monitoring the delivery of non-Medi-Cal services, such as educational services.

“Coordinated with CalWORKS to present job information at a school assembly.”

“Made a referral to a student for a job training course that was on campus.”

“Sent immunization letters to parents regarding missing immunization.”



# CODE 8

## Ongoing Referral, Coordination and Monitoring of Medi-Cal Services (PM/50-Percent FFP)

Staff should use this code when making ongoing referrals for, coordinating and/or monitoring the delivery of Medi-Cal covered services.

This code is used after an initial referral is made. The referral, coordination and monitoring of activities related to services in an IEP are reported in this code.



## Code 8 samples allowable by DHCS :

The following are good samples for code 8 from actual time surveys:

“I coordinated a student’s Medi-Cal health services with staff and a Speech Language Pathologist.”

”Called parent to review students information with Medi-Cal provider/doctor because of recurring hearing issues”.

# Code 8

## Corrections

### Not allowed

“Attended IEP meeting”

### Allowed

“At an IEP meeting, a Medi-Cal eligible student’s speech therapy was reviewed for the next year.”

### Not allowed

“Spoke to students who need a physical”

### Allowed

“At an IEP meeting, a Medi-Cal eligible student’s speech therapy was reviewed for the next year.”

### Not allowed

“Made a referral to a health care provider regarding a 504 plan.”

### Allowed

“Ongoing referral to a Medi-Cal Clinic for a student in need of non-mandated physical.”



# CODE 9

## Transportation for Non-Medi-Cal Services (U)

Staff should use this code when making or assisting an individual to obtain transportation to services **not covered** by Medi-Cal, or accompanying the individual to services **not covered** by Medi-Cal.

Here are examples of Code 9 activities:

“Arranged for transportation to take students to a school football game.”

“Scheduled the transportation for a class to attend a field trip to the zoo.”





# CODE 10

## Arranging Transportation in Support of Medi-Cal Services (PM/50-Percent FFP)

School employees should use this code when assisting an individual or family to obtain transportation to services covered by Medi-Cal including:

- Scheduling or arranging of transportation to Medi-Cal covered services.
- The time a transportation supervisor or staff use coordinating IEP transportation

Continued on next slide ....



## Not included are the following:

- Providing the actual transportation service.
- Any activity that contributes to the actual billing of transportation as a medical service (such as with the LEA Medi-Cal Billing Option program).
- Accompanying the Student to Medi-Cal covered service.

...continued



## Code 10 samples allowable by DHCS :

“Arranged transportation for a student to receive Speech Services.”

“Talked with transportation supervisor about bus changes to a route of a student who receives Occupational Therapy services”

# Code 10 Corrections

## Not allowed

“Arranging a ride for parents to attend an IEP.”

## Allowed

“Arranging a ride for parents and student to attend mental health services as part of an IEP referral.”

---

## Not allowed

“Arranged transportation for a child to receive services.”

## Allowed

“Arranged transportation for a child to receive speech and language services at another location.”

## Non-Medi-Cal Translation (U)

Code 11 should be used by school employees who provide translation services for non-Medi-Cal activities.

Here are examples for non-reimbursable activities for Code 11:

“Arranged translation with the secretary to assist a parent with finding childcare services for her children.”

“Provided translation for the nurse to inform a student’s parent about the vision health screenings provided by the school.”

# CODE 12

## Translation (PM/50-Percent FFP)

School employees providing Medi-Cal translation services as a third party to facilitate access to Medi-Cal covered services should use Code 12.

Translation may be allowable as an administrative activity if it is not included and paid for as part of a medical assistance service.

## **Code 12 samples allowable by DHCS :**

“Arranged for an interpreter to translate for an IEP meeting where Medi-Cal health concerns were discussed.”

“Translated for Certified Application Assistant, who was working with Spanish-speaking parents applying for Medi-Cal.”



# Code 12

## Corrections

### Not allowed

“Translation of IEP.”

### Allowed

“Translated for the school nurse to the parents on where and how to obtain Medi-Cal services for their child.”

---

### Not allowed

“Translation provided at IEP meeting.”

### Allowed

“Translated between the speech therapist and parent during an IEP meeting.”





# CODE 13

## Program Planning, Policy Development, and Interagency Coordination Related to Non-Medi-Cal Services (U)

This code should be used by staff performing collaborative activities with **other agencies** associated with the development of strategies to improve the coordination and delivery of non-medical/non-mental health services to students and their families.

Examples of Code 13 activities:

“Met with the County Office of Education to develop strategies to increase the capacity of tutoring services available to the school district.”

“Monitored the need for more student outreach of college awareness and how to be prepared.”



## CODE 14

### Program Planning, Policy Development, and Interagency Coordination Related to Medi-Cal Services (PM/50-Percent FFP)

This code should be used by staff performing collaborative activities with other agencies associated with the development of strategies to improve the coordination and delivery of Medi-Cal covered medical/mental health services to students and families.



## Code 14 samples allowable by DHCS :

“I attended an interagency meeting where we identified gaps in Medi-Cal health care within the community and discussed resources so that the Medi-Cal covered health services can be provided.”

“Finalized my notes from meeting with countywide agencies to coordinate health service agreements and sent notes to all participants.”

# Code 14

## Corrections

### Not allowed

“Developing strategies for services for families and their children.”

### Allowed

“Met with County Health Department to develop strategies to increase the capacity of school Medi-Cal health programs.”

---

### Not allowed

“Worked with a health center to provide services to students.”

### Allowed

“Worked with health care center discussing available medical programs that we can offer to students and families that may not have medical insurance.”

# CODE 15

## Medi-Cal Claims Administration, Coordination and Training (PM/50-Percent FFP)

This code should be used by the LEA, LEC, and LEA coordinators and time survey participants when performing activities that are directly related to Medi-Cal claims administration, coordination and training activities.



## Code 15 samples allowable by DHCS :

“Time spent filling out MAA time survey.”

“Reviewed with supervisor which daily activities should be coded as Code 14.”

# Code 15

## Corrections

### Not allowed

“Answered questions called in.”

### Allowed

“Answered questions from staff regarding how to complete the MAA time survey.”

---

### Not allowed

“Completed form.”

### Allowed

“Completed time survey form.”

# CODE 16

## General Administration/ Paid Time Off (R)

### General Administration:

Code 16 should be used for general administration duties that are specific to administrative/clerical activities related to facilities, district functions and operations.

### Paid Time Off (PTO):

- **Paid** time off is when you are being paid, but you are not at work. This includes paid vacation days, jury duty, sick leave, etc.
- **Unpaid** time off should be left blank on your time survey.



**Code 16**  
**samples allowable**  
**by DHCS :**

“Met with supervisor for an employee performance evaluation.”

“I was on jury duty for the full survey period”

# Code 16

## Corrections

### Not allowed

“Read emails.”

### Allowed

“Read emails about new employee benefits.”

---

### Not allowed

“Time off.”

### Allowed

“Approved time off for vacation.”

# Activity Code Reminders:

- Code 1 and Code 16 are sometimes confusing and are coded incorrectly.
- Code 4 is an *initial* referral and Code 8 is an *ongoing* referral.
- Code 8 and Code 14 are also sometimes confusing and are coded incorrectly. Code 8 is used when working with *in-house* staff. Code 14 is about the big picture not an individual student.
- Ask yourself, if it's not MAA reimbursable time, can it be coded to the parallel code?
- The matrix for Code 1 vs. Code 16 is available in the 2010/11 SMAA Provider Manual and made available to you via the website.

??? Questions ???

15 Minute Break



The background of the slide is white and features several large, stylized handprints in various colors: purple, yellow, and red. The handprints are arranged in a way that they appear to be scattered across the page, with some overlapping. The colors are vibrant and the handprints have a slightly irregular, painted appearance.

# **Site Visit Findings**

# **Time Survey Forms**

## **Top Findings:**

- 1) Narratives are coded incorrectly.**
- 2) Claiming codes 15 and/or 16 with no other reimbursable MAA codes being claimed.**
- 3) Not claiming Code 15 when reimbursable MAA codes are claimed.**

# Time Survey Forms

**Some other general findings include:**

- Activity sample given with no recorded time
- Time recorded with no activity sample
- Incorrect time survey dates
- Corrections and additions need initials
- Acronyms and terms were unclear

# Time Survey Forms

## Reminders...

1. Sample activity descriptions on each time survey form must maintain a minimum of 80% accuracy.
2. Initial each correction, strikeout, and addition. Whiteout is prohibited.
3. Claim to code 15 when allowable.



# Operational Plans

- Missing documentation
  - Duty Statements
  - Copies of Time Cards, Absence Reports, and/or Time Sheets
  - Time Survey participant's signature are missing on the TS Training sign-in sheet
  - Restricted Indirect Cost Rates ([www.cde.ca.gov/fg/ac/ic/documents](http://www.cde.ca.gov/fg/ac/ic/documents))
  - Medi-Cal Percentage

# California Department of Education (CDE) - School Fiscal Services Division

## 2010-11 Restricted Indirect Cost Rates for K-12 Local Educational Agencies - Five Year Listing

Address questions to [sacsinfo@cde.ca.gov](mailto:sacsinfo@cde.ca.gov), or call 916-322-1770

As of April 28,  
2010

				----- A P P R O V E D   R A T E S ----- ----				
				For use with state and federal programs, as allowable, in:				
County Co de	LEA Cod e	Typ e	LEA Name	2006-07  (based on 2004-05 expendit ure data)	2007-08  (based on 2005-06 expendit ure data)	2008-09  (based on 2006-07 expendi ture data)	2009-10  (based on 2007-08 expendi ture data)	2010-11  (based on 2008-09 expendi ture data)
01	10017	C	Alameda County Superintendent	8.43%	8.97%	9.22%	10.07%	9.64%
01	61119	D	Alameda City Unified	2.93%	2.84%	3.22%	3.40%	4.02%
01	61127	D	Albany City Unified	3.94%	3.77%	4.42%	4.21%	4.46%
01	61143	D	Berkeley Unified	7.82%	7.29%	6.79%	5.84%	6.27%
01	61150	D	Castro Valley Unified	5.65%	5.08%	4.43%	6.90%	7.85%
01	61168	D	Emery Unified	6.38%	2.50%	6.67%	8.62%	10.42%
01	61176	D	Fremont Unified	2.75%	4.16%	4.70%	4.90%	4.95%

## **Medi-Cal Administrative Activities (MAA) Program**

Medi-Cal Percentage  
Training Unified School District

**Region:** 12  
**District CDS:** 00000

**Quarterly file received:** 2  
**Original # in file: (undup)** 1799  
**Medi-Cal clients in file:** 713  
**1<sup>st</sup> Tape Match Percentage:** 39.63%  
*Use for 1<sup>st</sup> and 2<sup>nd</sup> Invoices*

**Quarterly file received:** 4  
**Original # in file: (undup)** 1817  
**Medi-Cal clients in file:** 717  
**2<sup>nd</sup> Tape Match Percentage:** 39.46%  
*Use for 1<sup>st</sup> and 2<sup>nd</sup> Invoices*

**The methodology used for the Medi-Cal percentage is the actual client count. The actual client count is determined by dividing the total number of Medi-Cal clients by the total number of all individuals served by the claiming unit for the applicable quarter.**

# **Organizational Tips for Future Site Visits**

- **Use a Table of Contents and readable tabs**
- **Include a “Print Name” field on all sign-in sheets**
- **Arrange Operational Plan by fiscal year using three ring binders**



# Questions & Answers

# School-Based MAA

**Questions**

**Comments**

**Thank you**